



Illinois Environmental Protection Agency · 2200 Churchill Road, Springfield, IL 62706

IL 005 076 542  
Compliance file

217/782-5544

April 7, 1986

Ms. Ann Budich  
U.S. Environmental Protection Agency  
230 S. Dearborn Street  
5HW-13  
Chicago, Illinois 60604

Re: Report on Non-Notifier ILD: None  
Royal Crown Bottling Company

*Cardford 16*

RECEIVED  
APR 10 1986  
SOLID WASTE BRANCH  
U.S. EPA REGION V

Dear Ms. Budich:

Enclosed is information relating to Royal Crown Bottling Company, a Non-Notifier under RCRA. If after follow-up by this Agency, this company does not come into compliance, we will refer this matter for enforcement.

Sincerely,

Steven R. Strauss  
Attorney  
Enforcement Programs

cc: Glen Savage  
Gary King  
Northern Region-Bob Wengrow

Enclosure





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REGION 5

230 SOUTH DEARBORN ST.  
CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

RCRA ACTIVITIES  
MAR 25 1987

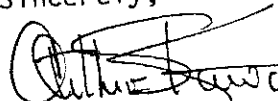
Royal Crown Cola  
PO BOX 878  
Rockford IL 61105

RE: EPA ID #: 14D005076542

In response to your request of 1-20-87 the following information  
has been updated: ID# to inactive

If you have any questions, please contact Sharon Kadden at 312/886-6173.

Sincerely,

  
Arthur S. Kawatachi  
Information Unit  
Program Management Section

cc: State Agency  
File



ROYAL CROWN<sup>®</sup> C - A



ROCKFORD NEHI - R.C. COLA  
2100 N. MAIN STREET  
P.O. BOX 878  
ROCKFORD, ILLINOIS 61105  
877-4081

ILD005076542

January 20, 1987

Brian Newquist  
Illinois E.P.A.  
Division Land Poll. Cont.  
2200 Churchill Road  
Springfield, Illinois 62706

Dear Brian:

*ILD005076542-N*

In response to a phone call from the local E.P.A., I am to inform you that we no longer produce any hazardous waste. We discontinued production as of August 1986.

*0303 = 9*

We are a non-handler as of August 1986.

In December 1986, B.F.I. Industries of Rockford, Illinois hauled all toxic waste to their dump site.

Thank you.

Dan Ruedinger  
R.C. Cola Rockford

DR/dd

*Dan Ruedinger*

RECEIVED

FEB 02 1987

U.S. EPA, REGION V

RECEIVED

JAN 21 1987





EPA Notification of Hazardous Waste Activity	
For Official Use Only	
Comments	
18 JUL 1986	
Installation's EPA ID Number	
Approval (for use only)	
Date Received (month, day, year)	
18 JUL 1986	
I. Name of Installation	
ROYAL CROWN BOTTLING CO	
II. Installation Mailing Address	
Street or P.O. Box	
2700 N MAIN ST / P O BOX 878	
City or Town	
ROCKFORD	
State	
IL	
ZIP Code	
61103	
III. Location of Installation	
Street or Route Number	
2700 N MAIN ST	
City or Town	
ROCKFORD	
State	
IL	
ZIP Code	
61103	
IV. Installation Contact	
Name and Title (last, first, and job title)	
ARQUETTE H PROD MGR	
Phone Number (area code and number)	
8158774051	
V. Ownership	
A. Name of Installation's Legal Owner	
N/A	
B. Type of Ownership (enter code)	
P	
VI. Type of Regulated Waste Activity (Mark "X" in the appropriate boxes. Refer to instructions.)	
A. Hazardous Waste Activity	
B. Used Oil Fuel Activities	
1a. Generator <input checked="" type="checkbox"/> 1b. Less than 1,000 kg/mo. <input type="checkbox"/>	
2. Transporter <input checked="" type="checkbox"/>	
3. Treater/Storer/Disposer <input checked="" type="checkbox"/>	
4. Underground Injection <input checked="" type="checkbox"/>	
5. Market or Burn Hazardous Waste Fuel (enter "X" and mark appropriate boxes below)	
a. Generator Marketing to Burner <input type="checkbox"/>	
b. Other Marketer <input type="checkbox"/>	
c. Burner <input type="checkbox"/>	
6. Off-Specification Used Oil Fuel (enter "X" and mark appropriate boxes below)	
a. Generator Marketing to Burner <input type="checkbox"/>	
b. Other Marketer <input type="checkbox"/>	
c. Burner <input type="checkbox"/>	
7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification <input type="checkbox"/>	
JUN 26 1986	
U.S. EPA, REGION V	
VII. Waste Fuel Burning: Type of Combustion Device (enter "X" in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)	
A. Utility Boiler <input type="checkbox"/> B. Industrial Boiler <input type="checkbox"/> C. Industrial Furnace <input type="checkbox"/>	
VIII. Mode of Transportation (transporters only — enter "X" in the appropriate box(es))	
A. Air <input type="checkbox"/> B. Rail <input type="checkbox"/> C. Highway <input type="checkbox"/> D. Water <input type="checkbox"/> E. Other (specify) WINNEBAGO-201	
IX. First or Subsequent Notification	
Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.	
A. First Notification <input checked="" type="checkbox"/> B. Subsequent Notification (complete item C) <input type="checkbox"/>	
C. Installation's EPA ID Number	

7/17/86 MB

EPA Form 8700-12 (Rev. 11-85) Use Only									
C									
W									T/A

# X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)

☐ 1. Ignitable (D001)

☐ 2. Corrosive (D002)

☐ 3. Reactive (D003)

☐ 4. Toxic (D000)

## XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature	Name and Official Title (type or print)	Date Signed

EPA Form 8700-12 (Rev. 11-85) Reverse

I am filling out this form because this Company ~~was~~<sup>is</sup> a non-notifier + IEPA was to get it in our system. 6-20 Brian Newquist





## Notification of Hazardous Waste Activity

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

## For Official Use Only

Comments

C

C

Installation's EPA ID Number

Approved

Date Received  
(yr. mo. day)

C

F

ILD005076542

T/A C

A-8

## I. Name of Installation

ROYAL CROWN BOTTLING CO

## II. Installation Mailing Address

Street or P.O. Box

C

3

2700 N MAIN ST P O BOX 878

City or Town

State

ZIP Code

C

4

ROCKFORD

IL 61103

## III. Location of Installation

Street or Route Number

C

5

2700 N MAIN ST

City or Town

State

ZIP Code

C

6

ROCKFORD

IL 61103

## IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C

2

ARQUETTE H PROD MGR 8158774051

## V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C

R

## VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

## A. Hazardous Waste Activity

## B. Used Oil Fuel Activities

☒

1a. Generator

☐

1b. Less than 1,000 kg./mo.

☐

2. Transporter

☐

3. Treater/Storer/Disposer

☐

4. Underground Injection

☐5. Market or Burn Hazardous Waste Fuel  
(enter 'X' and mark appropriate boxes below)☐

a. Generator Marketing to Burner

☐

b. Other Marketer

☐

c. Burner

☐6. Off-Specification Used Oil Fuel  
(enter 'X' and mark appropriate boxes below)☐

a. Generator Marketing to Burner

☐

b. Other Marketer

☐

c. Burner

☐7. Specification Used Oil Fuel Marketer (or On site Burner)  
Who First Claims the Oil Meets the Specification

## VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐

A. Utility Boiler

☐

B. Industrial Boiler

☐

C. Industrial Furnace

## VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

☐

A. Air

☐

B. Rail

☐

C. Highway

☐

D. Water

☐

E. Other (specify)

## IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☒

A. First Notification

☐

B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

ID - For Official Use Only													
C												T/A	C
W													1

# X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)

☐ 1. Ignitable  
(D001)

☐ 2. Corrosive  
(D002)

☐ 3. Reactive  
(D003)

☐ 4. Toxic  
(D000)

# XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature	Name and Official Title (type or print)	Date Signed

EPA Form 8700-12 (Rev. 11-85) Reverse

I am filling out this form because this  
Company ~~is~~ <sup>is</sup> a non-notifier + IEPA want  
to get it in our system. 6-20-86  
Brian Newquist